

| | | | | | |
|---------------|-------------------|-----------------|------------------|---------------------------|--|
| NUMBER | | NOT DONE | SATISFIED | Landscape As-built | |
| | | | | HTE: _____ | |
| | | | | BY _____ | |
| | CHECKLIST: | | | COMMENTS: | |

| | | | | |
|----|---------------------------------|--------------------------|--------------------------|---|
| 1 | Certification | <input type="checkbox"/> | <input type="checkbox"/> | Cover |
| 2 | Signature and seal | <input type="checkbox"/> | <input type="checkbox"/> | Cover |
| 3 | Relocated trees | <input type="checkbox"/> | <input type="checkbox"/> | Label or notation made |
| 4 | Water meter | <input type="checkbox"/> | <input type="checkbox"/> | Location identified |
| 5 | Controller | <input type="checkbox"/> | <input type="checkbox"/> | Location clearly shown and noted on the cover |
| 6 | Any additional features | <input type="checkbox"/> | <input type="checkbox"/> | Walls, sidewalks, trails, ramadas, etc. |
| 7 | Maintenance provider delineated | <input type="checkbox"/> | <input type="checkbox"/> | Cover |
| 8 | Water provider delineated | <input type="checkbox"/> | <input type="checkbox"/> | Cover |
| 9 | Substitute Materials | <input type="checkbox"/> | <input type="checkbox"/> | Throughout plan set |
| 10 | New Materials | <input type="checkbox"/> | <input type="checkbox"/> | Throughout plan set |
| 11 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 12 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 13 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 14 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 15 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 16 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 17 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 18 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 19 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 20 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 21 | | <input type="checkbox"/> | <input type="checkbox"/> | |
| 22 | | <input type="checkbox"/> | <input type="checkbox"/> | |